Mt. Horeb Area School District

EMPLOYMENT APPLICATION

1304 East Lincoln Street Mount Horeb, WI 53572

Position for which you are applying			Date of Application				
Last Name	First Name		Middle Name				
Present Street Address	City	State Z	ip Code			Telephone Number	
Street Address to Which You Wish Correspondence Sent City State Zip Code Cell Number							
Email Address	Date You Will Be Available						
Have You Filed an Application With Us Before?	□ No □ Yes When? Date:	☐ Yes When?			Inder What Name lame:		
High School	Location						
Additional Education (Most Recent First)							
Name and Location of School	Dates Attende Mo./YrMo./Y		egree	Grade Avg.	Point Scale	Type of Training	
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Have you ever pled guilty to or been convicted of a misdemeanor or felony?NoYes. If yes, provide further information as to the offense(s), date, location of court, etc. If the job you are applying for requires you to operate a motor vehicle, include traffic convictions. We will only consider your record as it may substantially relate to the circumstances of the job for which you are applying. The MHASD conducts criminal background checks on every employee.							
WORK EXPERIENCE (List Most Recent Fire	st)		Value		-bt	Danasa	
Dates (Month/Year) From To Empl	oyer Type	e of Work	Your Position	Your Highest Rate of Pay		Reason for Leaving	
Supervisor (Name, Title, Telephone)			Your	Va.ur.l.ii	ale a a t	Dancer	
Dates (Month/Year) From To Empl	oyer Type	e of Work	Position	Your Hi Rate of		Reason for Leaving	
Supervisor (Name, Title, Telephone)							
Dates (Month/Year) From To Empl	oyer Type	Type of Work		Your Highest Rate of Pay		Reason for Leaving	
Supervisor (Name, Title, Telephone)							
The district requires a physical examination and tuberculosis test of every employee. Do you have any handicapping condition(s) which might affect your ability to perform effectively in the position for which you are applying?NoYes. If yes, what accommodations can the school district provide to assist you?							
My signature below certifies that all statements made on this application are true and complete to the best of my knowledge. I understand that any false information or misrepresentation of factual information contained herein may result in rejection of my application or, if employed, may be cause for immediate dismissal. I authorize the district to contact past employers and other references. If I am hired, I authorize the district to respond to reference checks from future employers.							
Date Signature of	t Applicant						

The Mt. Horeb Area School District does not discriminate in hiring or employment on the basis of race, color, religion, age, sex, national origin, disability, ancestry, marital status, sexual orientation, military service, arrest or conviction record, or any other basis prohibited by local, state or federal law. No questions on this application are intended to secure information to be used for such discrimination.